

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 3  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>New Prosperity Foundation; The</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00488494         </div>	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="border: 1px solid black; padding: 2px; display: inline-block;">M M M / D D D / Y Y Y Y Y Y</div>	

  

Full Name (Last, First, Middle Initial) of Payee <b>XPS Professional Services</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>	
Mailing Address 220 E Adams St Suite 200		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">20528.52</div>	
City Springfield	State IL	Zip Code 62701	Transaction ID : <b>SE.4936</b>
Purpose of Expenditure Voter Contact Mail (also supports Biggert)		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House    State: <u>IL</u> <input type="checkbox"/> Senate    District: <u>11</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: G. WILLIAM (BILL) FOSTER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">191437.95</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____			

  

Full Name (Last, First, Middle Initial) of Payee <b>XPS Professional Services</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>	
Mailing Address 220 E Adams St Suite 200		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">20608.59</div>	
City Springfield	State IL	Zip Code 62701	Transaction ID : <b>SE.4937</b>
Purpose of Expenditure Voter Contact Mail (also supports Davis)		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House    State: <u>IL</u> <input type="checkbox"/> Senate    District: <u>13</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID MICHAEL GILL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">187187.43</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____			

  

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">41137.11</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gregory Baise

[Electronically Filed]

Signature \_\_\_\_\_ Date 

M M / D D / Y Y Y Y Y Y